

DECLARATION COMBINED WITH POWER OF ATTORNEY

Page 1 of 2
Attorney Docket No. 8607

As a below named inventor, I hereby declare that:

My residence, mailing address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled PORTABLE LOCKING SYSTEMS

the specification of which

(check
one)☒ [X]
☐ []

is attached hereto.

was filed on _____ as United States Application No. or

PCT International Application Serial No. _____

and was amended on _____

(if applicable)

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 C.F.R. §1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. §119(a)-(d) or §365(b) of any foreign application(s) for patent or inventor's certificate, or §365(a) of any PCT International application which designated at least one country other than the United States of America, listed below and have also identified below any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed:

Prior Foreign Application(s)Priority Claimed

(Number)

(Country)

(Day/Month/Year Filed)

☐ Yes☐ No

I hereby claim the benefit under 35 U.S.C. §119(e) of any United States provisional application(s) listed below.

Application Serial No.Filing DateApplication Serial No.Filing Date

I hereby claim the benefit under 35 U.S.C. §120 of any United States application(s), or §365(c) of any PCT International application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. §112, I acknowledge the duty to disclose information which is material to patentability as defined in Title 37 C.F.R. §1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application:

U.S. Parent Application Number	PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (If applicable)

As named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith:

<u>Atty Name</u>	<u>Atty Reg Number</u>	<u>Associate Power of Attorney Attached</u>	
Joan B. Tucker	43,962	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Ken K. Patel	33,988	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
David M. Weirich	38,361	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Steven W. Miller	31,984	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Jay A. Krebs	41,914	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Michael S. Kolodess	44,846	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
T. David Reed	32,931	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Timothy B. Guffey	41,048	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

SEND CORRESPONDENCE TO: Joan B. Tucker
The Procter & Gamble Company
Sharon Woods Technical Center
11450 Grooms Road
Cincinnati, OH 45242
Telephone No. (513) 626-1811 Fax No.: (513) 626-3004

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Full name of sole or first joint inventor **Joseph Raymond Diehl**

Inventor's signature Joseph R. Diehl 6/26/01
Date

Residence 6098 Lakewood Drive, Hamilton, OH 45011

Citizenship U.S.A.

Mailing Address 6098 Lakewood Drive, Hamilton, OH 45011

Full name of second joint inventor, if any **Don Randell Greer**

Inventor's signature _____
Date

Residence 5049 Tricounty View Drive, Hamilton, OH 45011

Citizenship U.S.A.

Mailing Address 5049 Tricounty View Drive, Hamilton, OH 45011

Full name of third joint inventor, if any **Hyundae Hong**

Inventor's signature _____
Date

Residence 7496 Rolling Meadows Drive, West Chester, OH 45069

Citizenship U.S.A.

Mailing Address 7496 Rolling Meadows Drive, West Chester, OH 45069

Full name of fourth joint inventor, if any **Donald Carroll Roe**

Inventor's signature _____
Date

Residence 6324 Emberwood Court, West Chester, OH 45069

Citizenship U.S.A.

Mailing Address 6324 Emberwood Court, West Chester, OH 45069

